

Credential Application

Remit to: **State of Wisconsin Department of Commerce-Credentialing** P.O. Box 78780 Milwaukee WI 53293-0780

Phone (608) 261-8500 TDD #: (608) 264-8777 7:45 a.m. - 4:30 p.m.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

THE CREDENTIAL WILL NOT BE PROCESSED UNLESS YOU:

- Sign and date this form:
- B. Submit a complete application with all blanks filled in or marked non-applicable;
- C. Attach the specified fee; and
- D. Attach documents if specified on this application.

Instructions: Please review the pre-printed information in the boxed portions of this application. Clearly print corrections or new information where needed. Please use a color of ink other than black. Be certain to sign and date the application. The applicant's social security number is mandatory information. Make a photocopy of the completed application for your records.

By signing below, the applicant swears that all information provided on this application is true, accurate and that the credential requirements are met. Notice: Information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purposes and other secondary purposes. The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39 stats. Social security numbers are required when applying for a license according to Wisconsin Stats. But they may not be disclosed to anyone except other State of Wisconsin governmental agencies.

Applicant's Signature	Date (mo/day/yr)
Applicant Information	
Applicant's Social Security No:	
Applicant's Name (First, Middle and Last):	
Address No. & Street, or P.O. Box:	
City, Town or Village, State, Zip + 4 Code:	
Country, If Other Than United States:	
Telephone No. (include area code):	
If Available, Fax No. (include area code):	
If Available, Internet Address:	

AUTOMATIC FIRE SPRINKLER SYSTEM TESTER CERTIFICATION

Application and Exam Fee (nonrefundable): \$30.00 class code 7630

Make checks payable to: Department of Commerce. The fee consists of a \$10 application fee and an exam fee of \$20. When the exam is passed, the applicant will be asked to pay a \$180 credential fee. The credential, which will be issued after the exam is passed and the prorated credential fee paid, will be effective for 4 years from the date of issuance Office location: 201 W. Washington Ave, Madison. Mailing address: PO Box 7082, Madison, WI 53707.

Reason for Credential: Pursuant to ss. 145.15 (4), 145.165 and 145.175, Stats., no person may install, maintain or repair automatic fire sprinkler systems unless the persons holds a credential issued by the department as a licensed automatic fire sprinkler contractor, a licensed journeyman sprinkler fitter, a registered automatic fire sprinkler system apprentice, a registered automatic fire sprinkler contractor-maintenance, or a registered automatic fire sprinkler fitter-maintenance. No credential is required if a person is repairing, replacing or maintaining electrical supervisory devices for existing automatic fire sprinkler systems.

No person may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by ch. Comm 14 unless the person holds a credential issued by the department as a licensed automatic fire sprinkler contractor, a licensed journeyman sprinkler fitter, a registered automatic fire sprinkler system apprentice, a registered automatic fire sprinkler contractor-maintenance, a registered automatic fire sprinkler fitter-maintenance or a registered automatic fire sprinkler system tester.

Requirements of Credential: A person who holds a credential issued by the department as a registered automatic fire sprinkler system tester may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by ch. Comm 14 and NFPA 25. A person who holds the credential shall carry on his or her person the credential issued by the department while performing or conducting the activity or activities permitted under the credential.

Examination: In order to obtain the credential the applicant must obtain a score of at least 70% on an examination. The exam will cover information contained in chapters Comm 5 and 82.41, Wisconsin Administrative Code; and NFPA standards 13 (2002 edition) 14 (2001 edition), and 25 (2002 edition) of the National Fire Protection Association. This exam is open book. Copies of current Wisconsin Administrative Code books may be obtained from Document Sales @ (608) 266-3358 or @ (800) 362-7253. NFPA standards may be ordered from the National Fire Protection Association @ (800) 344-3555. The list of adopted NFPA standards is found in Comm 62.3500 and IBC Chapter 35.

To schedule an exam:

- In the table below circle the month you would like to take the exam and the city in which you would like to take the exam. Record a telephone number where you can be reached during the day in case the exam center is filled for that date. The department will attempt to call and offer exams at available sites or dates.
- Submit the **FEE AND THIS APPLICATION** with the month and city circled for the exam to the division **at least 30 days** in **advance of the exam date chosen**. Note you may wish to keep a copy of this letter for your records.

Exam Name:		This is a 2-hour exam and will be scheduled for the p.m.		
Circle the exam lo	cation of your choice	ce below.		
Then below the loca	ation, circle the day y	ou would prefer to ta	ke the exam.	
	2006 Evom Schodula-S	oil Testors at Every Site		
2006 Exam Schedule-Soil Testers at Every Site GREEN BAY BLACK RIVER PEWAUKEE HAYWARD				
GREEN BAY	22202212722	PEWAUKEE	HAYWARD	
Howard Johnson Inn	FALLS	Waukesha County	Hayward Inn &	
2580 S Ashland Ave	Holiday Inn Express	Technical College	Suites	
920-499-5121	Hotel	WCTC	10290 Hwy 27 S	
	W10170 Hwy 54 E	800 Main St	(715) 634-4100	
	715-284-0888	262-695-3474		
August 15		August 1		
	September 19	September 13		7
October 10		October 3	October 18]
	November 14	November 7]
		December 5		7

Day phone number:

2007 Exam Schedule-Soil Testers at Every Site					
GREEN BAY Regency Suites Hotel 333 Main St 920-432-4555 Wednesdays	MADISON Radisson Hotel 517 Grand Canyon Dr. 608-833-0100 Tuesdays	BLACK RIVER FALLS Holiday Inn Express Hotel W10170 Hwy 54 E 715-284-0888 Wednesdays	PEWAUKEE Waukesha County Technical College WCTC 800 Main St 262-695-3474 Wednesdays	HAYWARD Hayward Inn & Suites 10290 Hwy 27 S 715-634-4100 Wednesdays	
		January 10	January 17		
February 21		February 7	February 14		
		March 7	March 14		
April 11	April 24	April 4		April 18	
		May 9	May 16		
June 6		June 13	June 20		
		July 11	July 18		
August 8	August 21	August 15			
		September 12	September 19		
October 3		October 10	October 17	October 24	
		November 7	November 14		
	December 11				

Day phone number:

A letter confirming the exact date, time and location will be sent to you.